

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 717299

**FILED**  
**Jan 19, 2011**  
**Secretary of State**

**Entity Name:** ORANGE PARK COMMUNITY THEATRE, INC.

**Current Principal Place of Business:**

2900 MOODY ROAD  
ORANGE PARK, FL 32073

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 391  
ORANGE PARK, FL 320670391

**New Mailing Address:**

**FEI Number:** 23-7115505

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WELLS, DAVID  
4743 CUMBERLAND COVE  
JACKSONVILLE, FL 32257 US

**Name and Address of New Registered Agent:**

WELLS, DAVID  
4743 CUMBERLAND COVE CT  
JACKSONVILLE, FL 32257 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DAVID B WELLS

01/19/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: COHN, BRENDA  
Address: 1546 GEMINI COURT  
City-St-Zip: ORANGE PARK, FL 32073

Title: VD  
Name: WELLS, BARBARA  
Address: 4743 CUMBERLAND COVE COURT  
City-St-Zip: JACKSONVILLE, FL 32257

Title: TD  
Name: WELLS, DAVID  
Address: 4743 CHAMBERLAND COVE CT  
City-St-Zip: JACKSONVILLE, FL 32257

Title: SD  
Name: MANNING, REGINA  
Address: 3598 MATEO PLACE  
City-St-Zip: ORANGE PARK, FL 32073

Title: VD  
Name: NELSON, ARVID  
Address: 141 MANGO COURT  
City-St-Zip: MIDDLEBURG, FL 32068

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DAVID B. WELLS, TREASURER

TD

01/19/2011

Electronic Signature of Signing Officer or Director

Date